

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	THE USE OF ANABOLIC AGENTS, ANTI-CATABOLIC AGENTS, ANTIOXIDANT AGENTS, AND ANALGESICS FOR PROTECTION, TREATMENT AND REPAIR OF CONNECTIVE TISSUES IN HUMANS AND ANIMALS
Attorney Docket Number::	024047.370B-US02
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	5
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Todd
Middle Name::	R.
Family Name::	Henderson
City of Residence::	Jarrettsville

State or Province of Residence:: MD
Country of Residence:: US
Street of mailing address:: 1604 Randallwood Court
City of mailing address:: Jarrettsville
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 21084

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Egypt
Status:: Full Capacity
Given Name:: Tarek
Family Name:: Hammad
City of Residence:: Baltimore
State or Province of Residence:: MD
Country of Residence:: US
Street of mailing address:: 715 Crosby Rd.
City of mailing address:: Baltimore
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 21228

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Egypt
Status:: Full Capacity
Given Name:: Medhat
Family Name:: Soliman
City of Residence:: Minya
Country of Residence:: Egypt
Street of mailing address:: 81 Ramsis Street
City of mailing address:: Minya
Country of mailing address:: Egypt
Postal or Zip Code of mailing address:: 61111

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Barbara
Middle Name:: E.
Family Name:: Corson
City of Residence:: Fawn Grove
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 225 Kunkle Road
City of mailing address:: Fawn Grove
State or Province of mailing address:: PA
Postal or Zip Code of mailing address:: 17321

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Louis
Family Name:: Lippiello
City of Residence:: Forest Hill
State or Province of Residence:: MD
Country of Residence:: US
Street of mailing address:: 1711 Boggs Road
City of mailing address:: Forest Hill
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 21050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity

Given Name:: Robert
 Middle Name:: W.
 Family Name:: Henderson
 City of Residence:: Baldwin
 State or Province of Residence:: MD
 Country of Residence:: US
 Street of mailing address:: 2807 Shady Grove Court
 City of mailing address:: Baldwin
 State or Province of mailing address:: MD
 Postal or Zip Code of mailing address:: 21013

Correspondence Information

Correspondence Customer Number:: 26853

Representative Information

Representative Customer Number:: 26853

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/192,318	07/11/02
10/192,318	Continuation of	09/274,881	03/23/99
09/274,881	Continuation-in-part of	09/249,335	02/12/99
09/249,335	An application claiming the benefit under 35 USC 119(e)	60/074,594	02/13/98
09/249,335	An application claiming the benefit under 35 USC 119(e)	60/088,205	06/05/98

Assignee Information

Assignee name:: NUTRAMAX LABORATORIES, INC.
Street of mailing address:: 2208 Lakeside Boulevard
City of mailing address:: Edgewood
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 21040